

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
	E.F.		04-26-01
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	MM	8	5-18-01
FORMALITY REVIEW	MM	572	06-19-01
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	10/21/03
2	10/21/03
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
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06/19/01